

State of New Jersey

DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
OFFICE OF CONSUMER PROTECTION
CHARITIES REGISTRATION & INVESTIGATION SECTION
124 HALSEY STREET, PO Box 45021
NEWARK, NJ 07101
(973) 504–6262

Long Form Initial Registration Statement CRI-150IC Confidential Information

Or	ganiz	zation Name					
1.	Are any of the organization's officers, directors, trustees or five most highly compensated employees related by						
	blood, marriage or adoption to:						
	a.	each other? Yes No					
	b.	b. any officers, agents, or employees of any fund-raising counsel or independent paid fund raiser under contract to the organization? ☐ Yes ☐ No					
	c.	c. any chief executive, employee, any other employee of the organization with a direct financial interest in the transaction, or any partner, proprietor, director, officer, trustee, or to any shareholder of the organization with more than two (2) percent interest in any supplier or vendor providing goods or services to the organization? □ Yes □ No					
2.	List the following information for each officer, director, trustee and the five most highly compensated executive staff employees: (Attach a separate sheet if needed.)						
		Name	Title	Home address	Telephone number Include area code	Relationship	
	_						
	_						
	_						
	_						
3.	Sig	nature					